

GUIDE TO
SCIENCE-BASED
PRACTICES **2**

Promising and Proven Substance Abuse Prevention Programs

Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
Division of Knowledge Development and Evaluation

Acknowledgments

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Foreword

Although recent reports show a leveling or decrease in substance use among our nation's youth, drug abuse remains a problem in our country. There were 14.8 million current users of illicit drugs in 1999. This figure represents 6.7 percent of the population ages 12 years and older. The 1999 National Household Survey also found increases in illicit drug use among adults ages 18–25. Although the rates for those 26–34 years old and 35 years and older have not changed significantly since 1994, overall statistics indicate that there is still work to be done in preventing substance abuse.

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Prevention (CSAP) developed this series of products in response to the ongoing substance abuse problems. The three components in this series support CSAP's mission to provide resources that are based on science, with measurable outcomes, and designed to help community and state leaders formulate targeted programs.

CSAP is committed to sponsoring, accumulating, and integrating knowledge regarding scientifically defensible and effective prevention practices. The primary foci of each document in this series is CSAP grantees, constituent organizations, and the communities these groups serve.

We are pleased to release this printed version of our Web-based guide to proven and promising substance abuse prevention programs. The information is arranged in an easy-to-read grid organized by risk factor and domain. Three indexes, arranged by program name, intervention, or risk/protective factors, provide additional search tools. Please note that this printed version is only a static view of a tool that will be updated and maintained on the Web site.

For each intervention, there are data on target age, Institute of Medicine prevention classification, program outcome, and the strategies specified in the Substance Abuse Prevention and Treatment block grant legislation.

For over a decade, CSAP has supported demonstration programs designed to identify interventions that work. This research confirms that there are a variety of proven approaches to substance abuse prevention. Interventions aimed at reducing the risk factors and increasing the protective factors linked to substance abuse and related problem behavior can produce immediate and long-term positive results.

This document is one in a series developed to help key stakeholders structure and assess scientifically defensible programs. It is designed to serve practitioners, researchers, and policymakers as we work together to develop innovative and effective solutions to substance abuse prevention that respond to the unique needs of our individual communities.

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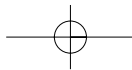
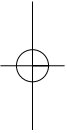
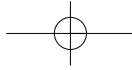


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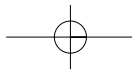
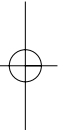
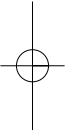
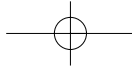
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Promising and Proven Substance Abuse Prevention Programs

Introduction

For more than a decade, the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP) has supported demonstration programs designed to identify interventions that work with populations at high risk to prevent substance abuse, delay its onset, and reduce substance abuse-related behaviors. Research now confirms that interventions aimed at reducing the risk factors and increasing the protective factors linked to substance abuse and related problem behavior can produce immediate and long-term positive results.

Substance abuse is a complex problem that develops in response to multiple influences. Spheres of activity within the community—typically called domains—include the individual, family, peer, school, community, and society/environment. Each domain presents an opportunity for preventive action.

Promising and Proven Substance Abuse Prevention Programs is a comprehensive compilation of both proven and promising interventions presented in an easy-to-scan grid (henceforth referred to as the Data Matrix), organized by risk factor and domain. For each intervention, the Data Matrix also includes information on target age, Institute of Medicine (IOM) prevention classification, program outcome, and the strategies specified in the Substance Abuse Prevention and Treatment (SAPT) block grant legislation. The IOM classification scheme helps delineate audiences for prevention programs. The three categories are universal, selective, and indicated preventive interventions. Definitions follow:

- **Universal preventive interventions:** Activities targeted to the general public or a whole population group that has not been identified on the basis of individual risk.

Substance Abuse Prevention and Treatment (SAPT) Strategies

- **Information dissemination** to increase knowledge and change attitudes about substance use and abuse through activities such as classroom discussions and media campaigns.
- **Prevention education** to teach participants important social skills such as drug resistance and decision making.
- **Alternatives** to offer opportunities for participation in developmentally appropriate drug-free activities to replace, reduce, or eliminate involvement in substance use-related activities.
- **Problem identification and referral** to recognize individuals with suspected substance use problems and refer them for assessment and treatment.
- **Community-based processes** to expand community resources dedicated to preventing substance use and abuse through activities such as building community coalitions.
- **Environmental approaches** to promote policy changes that reduce risk factors and preserve or increase protective factors such as stepped-up enforcement of legal purchase age for alcohol and tobacco products.

- **Selective preventive interventions:** Activities targeted to individuals or a subgroup of the population whose risk of developing a disorder is significantly higher than average.
- **Indicated preventive interventions:** Activities targeted to individuals in high-risk environments. These individuals are identified as having minimal but detectable signs or symptoms foreshadowing disorder or having biological markers indicating predisposition for disorder but not yet meeting diagnostic levels.

The SAPT block grant legislation provides funding to states to support activities related to the diagnosis, treatment, and prevention of mental illness and addictive disorders. Types of funded strategies are noted in the box.

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The data matrix provides information on CSAP domains, IOM classifications, and SAPT strategies. This information allows users to identify programs that will best address their needs. For example, Growing Healthy is in the individual domain, targeting children 5 to 12 years old. It falls into the IOM category of universal preventive interventions, so it is targeted to all children in that age group. It uses two SAPT strategies: information dissemination and prevention education.

Why the Information in the Matrix is Important

Today, Federal and State agencies, local governments, and private foundations are interested in funding substance use prevention programs with measurable outcomes. The new emphasis on performance means that prevention practitioners must show that the programs they propose are both outcome-oriented and likely to achieve the outcomes predicted. The prevention field now has an empirical knowledge base to assist programs in selecting proven approaches. Using scientifically defensible interventions will help practitioners respond to demands for accountability while ensuring that program participants receive the most effective services available.

The interventions and models that follow have been identified through a combination of review efforts. These include meta-analyses, expert peer and consensus panels, and evaluations conducted or supported by CSAP, the National Institute on Drug Abuse, the National Institute on Alcohol Abuse and Alcoholism, and the U.S. Departments of Justice and Education, among others. While some reviews were more rigorous than others, all of the interventions and models that appear in the Data Matrix can serve as program building blocks for prevention providers committed to offering effective services.

Promising and Proven Substance Abuse Prevention Programs is one in a series of three interrelated tools that CSAP has developed to assist program planners, evaluators, administrators, and policy makers in designing and assessing scientifically defensible programs. The other tools are the following:

- *Science-Based Substance Abuse Prevention: A Guide*, a comprehensive, technical description of the CSAP methodology for identifying scientifically defensible programs; and
- *Principles of Substance Abuse Prevention*, a selected listing of proven and cited principles organized by CSAP domain.

This document has also been designed as a Web-based document of substance abuse prevention programs with hot links to additional information about many of the programs listed in this matrix, including contact information for many of the program developers. (To access the up-to-date Data Matrix online, go to www.samhsa.gov/csap/modelprograms.) Data Matrix users can tap into much of the information currently available on a particular program via the Web site, and information can be readily updated as more programs undergo the review process.

How to Use the Matrix

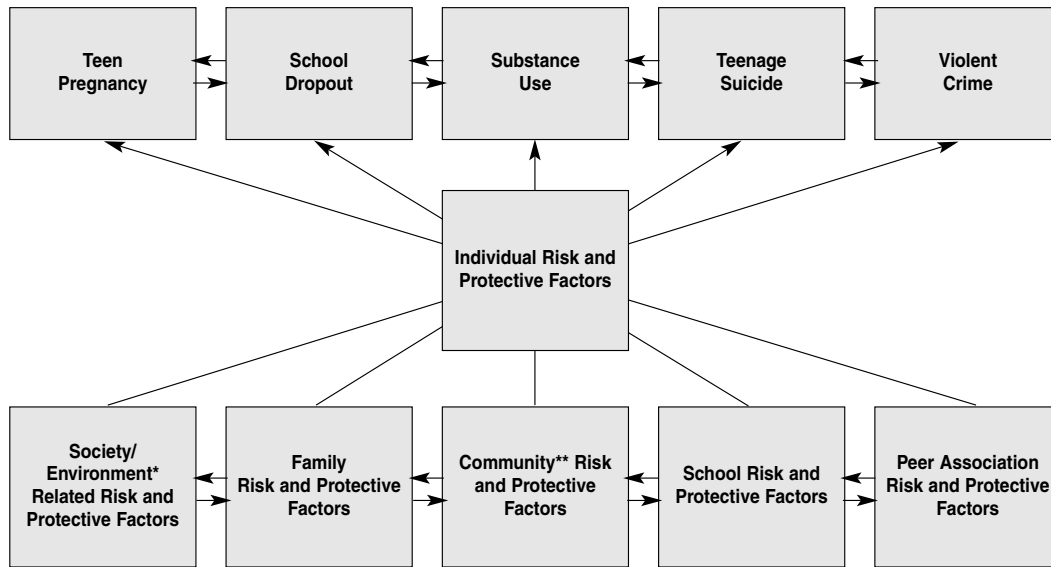
The Data Matrix is organized by six domains of activity (individual, family, peer, school, community, and society/environmental). As individuals develop, they interact with these domains, which play a role in determining whether a substance abuse problem develops. The Web of Influence (figure 1) illustrates those dynamic and complicated relationships.

In addition, the matrix includes information on specific risk/protective factors, interventions, programs supporting the interventions, target age, IOM category, program outcomes, and SAPT strategies used by the programs.

Three indexes allow users to search the matrix for scientifically defensible prevention programs by name (Index I), by subcategory of domain factors (Index II), and by outcome by domain (Index III).

It is important to note that programs are often complex and target multiple domains and risk factors. As a result, many programs appear under more than one domain and are included in more than one matrix.

Figure 1
Web of Influence



* Society/Environment: Refers to the total complex of external social, cultural, and economic conditions affecting a community or an individual.

** Community: Refers to the specific geographic location where an individual resides and to the conditions within that particular area.

Program Name—Index I

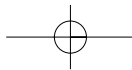
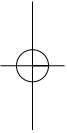
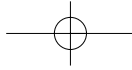
To find a specific program by name, refer to Index I, which includes an alphabetized list of all programs included in the Data Matrix.

Interventions by Domain—Index II

To find specific interventions, refer to Index II.

Outcomes by Domain—Index III

To find specific outcomes, refer to Index III.



Programs

INDEX I

Program Name	Matrix
Across Ages ^{6,35}	G, N, Z, HH
ADEPT Drug and Alcohol Community Prevention Project ²²	X
Adolescent Alcohol Prevention Trial ^{11,48}	EE
Adolescent Transitions Program ¹⁰	P, Q
African American Adolescent Alcohol and Drug Program ²²	K
ATLAS ¹⁸	B, C, D, E, N, Y, DD
Be a Star ⁴⁴	A, E, F, G, N, O, Q, W
Big Brothers/Big Sisters ⁵⁷	G
CASPAR Intervention Project ²²	CC
Child Development Project ^{1,6}	Y, AA, CC
Coate & Grossman (1988) ⁷	KK
Comprehensive Youth and Family Excellence Project ²²	E
Communities Mobilizing for Change on Alcohol ⁵⁹	II
Creating Lasting Connections ^{6,25,51}	A, E, F, L, P, Q, R, S, T, V, Y, EE, II
DARE To Be You ⁶	P
Early Childhood Substance Abuse Prevention Program ¹⁶	A
Early Intervention Program with Delinquent Substance-Using Adolescents ¹⁶	K
Families and Schools Together ²²	Q
Family Advocacy Network ^{6,16,50}	E, L, Q
Family Effectiveness Training ^{55,56}	Q
Focus on Families ⁴⁸	P
Greater Alliance of Prevention Systems ⁶	F, GG
Growing Healthy ³⁶	B
Growing Up Well ²²	CC
Helping Children and Their Families Face Drug Abuse ²²	X
Houston Parent-Child Development Center ²⁴	K
I'm Special ²⁹	B
Keep a Clear Mind ^{160,62}	Q, V
Kazdin et al. (1992) ²⁸	P
La Familia Fuerte ¹⁶	Q, X
Lakeland County Fighting Back Project ⁴	II
Life Skills Training Program ^{3,46}	C, L
Multi-Model School-Based Prevention Demonstration ^{19,20}	Y
NTU Project ²³	F, Y
Ozarks Fighting Back ⁴	II
Palmgreen et al. (1995) ⁴⁰	O, LL
Peer Assistance and Leadership ³⁴	L, V, Y, Z, BB
Peer Support Retreats ¹⁷	V
Perry Preschool Project ²	K
Perth Amboy Community Partnership for Youth ²²	CC
Positive Action ¹⁵	A, B, C, E, F, G, I, K, L, N, P, Q, R, T, W, X, Y, AA, CC, EE
Prenatal/Early Infancy Project ^{37,38,39}	S
Project ALERT ¹³	C
Project C.A.R.E. ²³	E, L
Project Family ^{48,49}	P
Project HIPATHE ³²	BB

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Project Involvement ²²	II
Project Northland ^{43,61}	II
Project Self-Discovery ¹⁶	M, GG
Project STAR ^{41,42}	Q, FF, II, LL
Project SUCCESS ⁴⁵	X
Project Towards No Tobacco Use ^{8,52,53,54}	A, B, C, E, L, LL
Reaching High-Risk Youth in Public Housing ²²	GG
Reconnecting Youth Program ¹²	X
Residential Student Assistance Program ⁶	K, L
Safe 2000 Community Partnership ⁴	II
School-based Treatment Aftercare Support Groups ³²	J
School Connectedness and Student Resiliency: Skills for Action ³³	L, Y
Seattle Social Development Project ^{21,48}	I, R, W, AA
SMART Leaders ^{6,16,50}	A, E, H, U, GG
SMART Moves (in Boys and Girls Clubs) ⁵	GG
Southwest Texas State University's Program ^{16,23}	A, W, GG
Stop Teenage Addiction to Tobacco ⁹	FF, JJ
Storytelling for Empowerment ²²	A
Strategies with Technology and Affective and Remedial Support ²²	Z
Strengthening Families Program ^{30,31}	P, T
Strengthening Hawaii Families Program ^{26,27}	P, Q
Substance Abuse Resources and Disability Issues ¹⁶	II
Sunshine Project ¹⁶	X
Teenage Health Teaching Modules ¹⁴	B
Tremblay et al. (1991, 1995) ⁵⁸	K
Tri-County Substance Abuse Prevention Alliance ⁴	CC, II
Woodrock Youth Development Program ¹⁶	A, B, E
Yale Child Welfare Project ⁴⁷	K

Interventions by Domain

INDEX II

INDIVIDUAL DOMAIN

After-school alcohol, tobacco, and drug education/peer-led curricula.....	A, E
Case management approach, involving in-school intervention programs, technical training, cultural awareness, and therapy	K
Classroom curricula designed to motivate pro-health decisions and skill use.....	B
Classroom curricula designed to specifically address alcohol, tobacco, and drug-related behavior (above curricula with multiyear booster sessions)	C
Classroom management with individual and group counseling/family therapy.....	I
Classroom/peer-led curricula, including education.....	A
Coach-facilitated, peer-led interactive curriculum	C
Community service	N
Culturally appropriate activities.....	F, G
Curricula incorporating cultural heritage lessons along with culturally appropriate activities	F
Education peer support groups reinforcing unsupportive attitudes toward sexual permissiveness	H
Home visits	K
In-school alcohol, tobacco, and drug education	E
Institutional placement, peer support groups, drug and social skills education, and individual counseling	K
Instructor-facilitated, peer-led interactive curriculum	D
Life skills training/values clarification and antiviolence models	K
Life skills training/values clarification.....	F
Life skills/social skills training (e.g., classroom training, training outside of school, role-play)	L
Life/social skills training	K
Mentoring	G
Outpatient drug abuse treatment with aftercare support groups.....	J
Public service announcements (PSAs) warnings of dangers of drug use and other risk-taking behavior	O
Social group work combined with social skills education and artistic engagement.....	N, O
Sport team-centered, peer-led interactive curriculum.....	E
Team-centered sport nutrition and exercise curriculum with goal-setting and weight room instruction	B
Team-centered, peer-led interactive curriculum	N
Therapeutic interventions combined with social skills education and artistic engagement	M

FAMILY DOMAIN

Home visits.....	S
Individual and parent/child counseling, parent education, play therapy, skill-building for children.....	T
Parent education.....	S
Parent education and classroom management.....	R
Parent education/family therapy	Q
Parent education/parenting skills training	P
Task-oriented family education sessions combining social skills training to improve family interaction (e.g., communication skills)	Q

PEER DOMAIN

Classroom and peer support groups reinforcing unsupportive attitudes toward sexual permissiveness.....	U
Guided peer reinforcement of pro-abstinence norms among children with recurrent conduct problems, combined with drug education and peer resistance skill-building.....	V
Involving youth in alternative/recreational activities	W
Parent education and classroom management	W
Peer resistance education.....	V, W
Task-oriented family education sessions combining social skills training to improve family interaction (e.g., communication skills).....	V

Guide to Science-Based Practices**SCHOOL DOMAIN**

Changes in teaching approaches and parent involvement	CC
Comprehensive health curricula, combined with Student Assistance Program model	CC
Comprehensive school change programs including components to improve parent involvement, change classroom management and/or instructional style, and improve student participation and school bonding	AA
Creating supportive school communities	Y
Creation and enforcement of clear drug policies, often accompanied by change in disciplinary codes and installation of security devices	CC
Individual and group counseling based on drug education, self-esteem, stress reduction, family/peer relations, decisionmaking skills, and school attitude	Z
Instructor-facilitated, sport team-centered, peer-led interactive curriculum	Y
Life and social skills training	Y
Life skills training with role play	DD
Mentoring	Z
Peer tutoring, along with school-based skills development and substance abuse education	BB
Peer tutoring, along with school-based skills development and substance abuse education	X
Peer tutors and use of school for after-hours enrichment and parent education	BB
School-based support group and skills development class	X
Student Assistance Program, including teacher training, student programming, and school policy change	CC
Tutoring, peer tutoring, homework assistance	X

COMMUNITY DOMAIN

Education to alter perceptions of societal norms and expectations	EE
Enforcement of tobacco sales laws	FF
Establishment of drug-free sites within communities	FF
Establishment and funding of prevention infrastructure with opportunities for community "ownership"	II
Establishment of supervised youth recreational and cultural programs	GG
Mentoring combined with community service and drug education	HH
Multiagency activities and collaboration	II

SOCIETY DOMAIN

Classroom-based media education to counter alcohol and tobacco advertising	LL
Enforcement of tobacco sales laws	JJ
Increased taxes on alcohol and tobacco	KK
PSAs warning of dangers of drug use and other risk-taking behaviors	LL

Outcomes by Domain

INDEX III

Individual Domain

Decrease in rejection of conventional values.....	F, K
Decreased amount of fighting and trouble with the police	K
Decreased levels of tobacco, alcohol, and marijuana use	A, B, C, E, K, L
Greater improvement in identifying unsafe objects related to ATIDs	A
Improved ability to cope with stress and reduced perceived psychological stress and problems	M
Improved knowledge and attitudes about drugs and alcohol; delayed tobacco smoking	A, B, E
Improved nutrition and exercise behaviors	B
Improved perception of athletic competence	N
Improved school attendance	L
Improved skills in goal setting.....	L
Increased communication, decision-making skills, and ability to refuse to use substances	L
Increased family and school bonding	G
Increased knowledge of alcohol, drugs, and sexual activity	A, H
Increased knowledge; decreased use of anabolic steroids, alcohol, and drugs	C
Increased perception of harm caused by substance use	A
Increased self-control.....	O
Increased self-efficacy and self-concept	F, K, N
Increased sense of well-being and knowledge of community service; more positive attitudes toward people and the future.....	G, N
Fewer perceived social benefits from using marijuana	E
Lower willingness to use substances	E, G
Lowered initiation of anabolic steroids, alcohol, drugs, and sport supplement use; increased perception of personal susceptibility to anabolic steroids' harmful effects.....	D, E
Reduced antisocial behavior	F, G, K
Reduced truancy, delinquency, and school dropout; improved academic performance	I, J, K, L
Sensation-targeted PSAs reduced participation in high-risk behaviors.....	O
Significantly increased cultural pride	F

Family Domain

Decreased child abuse and neglect, reduced prenatal problems, delayed subsequent pregnancies, improved high school graduation rates	S
Decreased child behavior problems	Q
Decreased family pathology.....	P, Q, S
Decreased use of marijuana, tobacco, and alcohol	Q, T
Enhanced parent-child communication regarding refusing and avoiding alcohol, tobacco, and illicit drugs	Q
Improved behavioral outcomes among children of recovering substance abusers, decreased tobacco and alcohol use, decreased family conflict, and increased family communication	T
Improved school performance and behavioral outcomes.....	Q
Improved self-concept	P
Increased ability to refuse alcohol, tobacco, and marijuana	Q
Increased parental self-efficacy, parental discipline, and monitoring	P
Increased parenting skills; decreased parental drug use	P
Increased use of community services for personal and family problems	P
Increased youth bonding with mother and father	R
Increased youth involvement in setting family rules (both ATID rules and non-ATID rules)	P
Reduced antisocial behavior, improved academic skills, greater commitment to school, reduced levels of alienation, and better bonding to prosocial persons	R
Reduced disciplinary problems	R

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Reduced family conflict, improved school behavior, and reduced tobacco useP
 Reduced parental stress; decreased child dysfunction and aggressive, antisocial, and delinquent behavior;
 increased prosocial competenceP,Q

Peer Domain

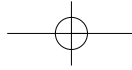
Decreased perception of peer alcohol, tobacco, and marijuana useV
 Improved self-concept.....W
 Increased ability to resist peer pressure and lower involvement with peers who use harmful substances.....V, W
 Increased Getting Real communication with peers (communication based on ability to say no and feel good
 about oneself and one's responses to inappropriate ATID-related and other behaviors).....V
 Increased knowledge about sex and less permissive views of early sexual activity.....U, V
 Increased prosocial behaviorW
 Reduced delinquency with weaker effects on drug use.....W
 Reduced violence and truancy.....W

School Domain

Decreased substance abuse and delinquency and improved grades.....X, Y, AA, BB
 Fewer days absent and improved attitudes toward schoolY, Z, CC
 Higher scores on standardized achievement tests.....X
 Immediate school expulsion policy implemented for possession of substancesCC
 Improved perception of the school team as an information source.....Y
 Improved reading and math test scoresX
 Improved school climate and policies through school/community partnership approach.....BB
 Improved Spanish, social studies, science, and overall grade point average.....X
 Improved teacher practices led to positive changes in classroom behaviors, which, in turn, were related
 to students' sense of community.....AA, CC
 Increased attendance, reduced discipline referralsY, BB
 Increased refusal skillsDD
 Increased use of treatment facilities by students; staff who participated in the workshops more likely to talk to
 students regarding alcohol, tobacco, and drug issues and refer students for help.....CC
 Less than optimal implementation of curricula and failure to adopt Student Assistance Program model
 resulted in program failure.....CC
 Reduced substance use.....CC
 School board adoption of school substance abuse policy, purchase of tobacco products by minors declinedCC

Community Domain

Benefited from being part of the consortium by forming new linkages, and consortia goals and objectives were
 achievedII
 Decreased levels of substance use; increased assertiveness and cultural pride.....GG
 Decreased presence of crack cocaine and community drug-dealing activity in public housing with new
 Boys and Girls Clubs; decreased vandalized housing; and reduced drug use.....GG
 Enhanced community capacity (including infrastructure and resource development)II
 Established a 108-member coalition representing almost all key components of the community; established a
 "Prevention Development Fund Program" to support services to youth; increased coordination between public
 and private agenciesII
 Improved awareness and knowledge of substance use/abuse issues for disabled youth.....II
 Improved self-concept.....EE
 Increased family members' use of community services for personal and family problems.....EE
 Increased ability to cope with stress.....GG
 Increased ability to resist peer pressure and lower involvement with peers who use harmful substances.....GG
 Increased sense of well-being and knowledge of community service; more positive attitudes toward people
 and the future.....HH
 Prevented drug useEE
 Reduced delinquency incidentsGG
 Reduced initiation of marijuana, tobacco, and alcohol in youth who never used, and increased
 perceptions of friends' intolerance of alcohol and drug useFF, II



Reduced likelihood of 18-20-year-olds to: provide alcohol to other teens, try to buy alcohol, drink in a bar,
or consume alcoholII
Strengthened relationships among police, schools, and substance abuse organizations; promoted
coordination of services for minority populationsII

Society Domain

Decreased use of tobacco productsJJ, LL
Increased beer prices reduced frequent youth drinkingKK
Reduced use of marijuana, tobacco, and alcoholLL
Sensation-targeted PSAs reduced participation in high-risk behaviorsLL

Guide to Science-Based Practices**Individual Domain****A
ATIDs Knowledge and Attitudes****Targeted Risk/Protective Factor:***Knowledge regarding risks associated with substance use/abuse is related to decreased risk of initiating or continuing use of substances*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Classroom/peer-led curricula, including education				
Early Childhood Substance Abuse Prevention Program	2–5 years	Universal	Greater improvement in identifying unsafe objects related to ATIDs	Information Dissemination Prevention Education
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced substance use	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Project Toward No Tobacco Use	10–15 years	Universal	Decreased use of tobacco products	Information Dissemination Prevention Education
SMART Leaders	13–17 years	Selective	Increased knowledge of alcohol, drugs, and sexual activity	Information Dissemination Prevention Education
Southwest Texas State University's Program	<13 years	Selective	Increased perception of the harmfulness of substance use	Information Dissemination Prevention Education Alternatives
Storytelling for Empowerment	<13 years	Universal	Increased perception of harm caused by substance use	Information Dissemination Prevention Education
Woodrock Youth Development Program	9–13 years	Universal	Increased knowledge of the negative effects of substance use	Information Dissemination Prevention Education
INTERVENTION: After-school alcohol, tobacco, and drug education				
Be a Star	5–12 years	Selective	Increased negative attitudes toward use of alcohol and other drugs	Information Dissemination Prevention Education Alternatives
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Increased alcohol and other drug knowledge and beliefs (by youth)	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes

**B
ATIDs Knowledge and Attitudes****Targeted Risk/Protective Factor:***Lack of information on positive health behaviors is associated with increases in substance use*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Classroom curricula designed to motivate pro-health decisions and skill use				
Growing Healthy	5–12 years	Universal	Improved knowledge and attitudes about drugs and alcohol; delayed tobacco smoking	Information Dissemination Prevention Education
I'm Special	8–12 years	Universal	Decreased use of alcohol and drugs; reduced problem behaviors	Information Dissemination Prevention Education Alternatives

Table B continued on the next page

Individual Domain*Continued from the previous page*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced substance use	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Project Toward No Tobacco Use	10–15 years	Universal	Decreased use of tobacco products	Information Dissemination Prevention Education
Teenage Health Teaching Modules	13–17 years	Universal	Decreased drug use problems, alcohol use, etc.	Information Dissemination Prevention Education Community-based Processes
Woodrock Youth Development Program	9–13 years	Universal	Increased knowledge of negative effects of substance use	Information Dissemination Prevention Education
INTERVENTION: Team-centered sport nutrition and exercise curriculum with goal-setting and weight room instruction				
ATLAS	13–19 years	Universal	Improved nutrition and exercise behaviors	Information Dissemination Prevention Education Alternatives

C ATIDs Knowledge and Attitudes

Targeted Risk/Protective Factor:*Lack of information on drug-related topics in curriculum is associated with increases in substance use*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Classroom curricula designed to specifically address alcohol, tobacco, and drug-related behavior (above curricula with multiyear booster sessions)				
Life Skills Training Program	13–17 years	Universal	Decreased use of alcohol, tobacco, and marijuana	Information Dissemination Prevention Education
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced substance use	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Project ALERT	11–14 years	Universal	Decreased use of alcohol, tobacco, and marijuana	Information Dissemination Prevention Education
Project Toward No Tobacco Use	10–15 years	Universal	Decreased use of tobacco products	Information Dissemination Prevention Education
INTERVENTION: Coach-facilitated, peer-led interactive curriculum				
ATLAS	13–19 years	Universal	Increased knowledge; decreased use of anabolic steroids, alcohol, and drugs	Information Dissemination Prevention Education Alternatives

Guide to Science-Based Practices**Individual Domain****D
ATIDs Knowledge and Attitudes****Targeted Risk/Protective Factor:***Intentions to use drugs increase future use of drugs*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Instructor-facilitated, peer-led interactive curriculum				
ATLAS	13–19 years	Universal	Reduced intentions to use, and use of, anabolic steroids	Information Dissemination Prevention Education Alternatives

**E
ATIDs Knowledge and Attitudes****Targeted Risk/Protective Factor:***Negative attitudes toward substances and substance use are associated with decreased likelihood of initiating or continuing use of substances*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: After-school alcohol, tobacco, and drug education/peer-led curricula				
Be a Star	5–12 years	Selective	Increase in negative attitudes toward use of alcohol and drugs	Information Dissemination Prevention Education Alternatives
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Decrease in favorable attitudes toward alcohol, tobacco, and drug use	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Comprehensive Youth and Family Excellence Project	9 years	Selective	Less likely to say they are willing to use drugs	Information Dissemination Prevention Education
Family Advocacy Network	13–17 years	Selective	Fewer perceived social benefits from using marijuana	Information Dissemination Prevention Education
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced substance use	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
SMART Leaders	13–17 years	Selective	Less favorable attitudes toward alcohol, marijuana, and tobacco	Information Dissemination Prevention Education
Woodrock Youth Development Program	9–13 years	Universal	Reduced levels of substance use	Information Dissemination Prevention Education
INTERVENTION: In-school alcohol, tobacco, and drug education				
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced substance use	Information Dissemination Prevention Education Process Environmental Approaches
Project C.A.R.E.	9 years	Selective	Lower willingness to use substances	Prevention Education
Project Toward No Tobacco Use	10–15 years	Universal	Decreased use of tobacco products	Information Dissemination Prevention Education

Table E continued on the next page

Individual Domain*Continued from the previous page*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Sport team-centered, peer-led interactive curriculum				
ATLAS	13–19 years	Universal	Lowered initiation of anabolic steroids, alcohol, drugs, and sport supplement use; increased perception of personal susceptibility to anabolic steroids' harmful effects	Information Dissemination Prevention Education Alternatives

**F
Values****Targeted Risk/Protective Factor:***Bonding to prosocial culture is related to lower delinquency and lower substance use*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Curricula incorporating cultural heritage lessons along with culturally appropriate activities				
NTU Project	<13 years	Selective	Greater appreciation for African heritage and more positive Afrocentric values and racial identity	Information Dissemination Prevention Education
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved self-concept	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
INTERVENTION: Culturally appropriate activities				
Be a Star	5–12 years	Selective	Increased prosocial behavior	Information Dissemination Prevention Education Alternatives
Greater Alliance of Prevention Systems	13–17 years	Selective	Significantly increased cultural pride	Information Dissemination Alternatives Community-based Processes Environmental Approach
INTERVENTION: Life skills training/values clarification				
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Decrease in rejection of conventional values	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes

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Individual Domain

G Values

Targeted Risk/Protective Factor:

Positive relationships with adults are related to decreases in multiple problem behaviors, including substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Mentoring				
Across Ages	<13 years	Selective	Increased positivity toward older people and improved attitude toward the future, school, and others	Information Dissemination Prevention Education Alternatives
Big Brothers/Big Sisters	10–14 years	Selective	Less likely to initiate alcohol and drug use	Prevention Education Alternatives
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced disciplinary problems	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
INTERVENTION: Culturally appropriate activities				
Be a Star	5–12 years	Selective	Increased family and school bonding	Information Dissemination Prevention Education Alternatives

H Problem Behaviors

Targeted Risk/Protective Factor:

Early sexual activity/teen pregnancy is associated with multiple problem behaviors, including substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Education peer support groups reinforcing unsupportive attitudes toward sexual permissiveness				
SMART Leaders	13–17 years	Selective	Increased knowledge about sex and less permissive views of early sexual activity	Information Dissemination Prevention Education

I Problem Behaviors

Targeted Risk/Protective Factor:

Violence/aggression is associated with multiple problem behaviors, including substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Classroom management with individual and group counseling/family therapy				
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced violence and truancy	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Seattle Social Development Project	<13 years	Universal	Decreased aggressive behavior for second-grade males (based on teacher ratings)	Information Dissemination Prevention Education

Individual Domain**J
Problem Behaviors****Targeted Risk/Protective Factor:***Early substance use is related to subsequent use and abuse*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Outpatient drug abuse treatment with aftercare support groups				
School-based Treatment Aftercare Support Groups	3–7 years	Indicated	Decreased aggressive behavior for second-grade males (based on teacher ratings)	Prevention Education

**K
Problem Behaviors****Targeted Risk/Protective Factor:***Criminal/delinquent activity is associated with multiple problem behaviors, including substance use*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Institutional placement, peer support groups, drug and social skills education, and individual counseling				
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced disciplinary problems	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Residential Student Assistance Program	13–17 years	Indicated	Decreased use of alcohol, tobacco, and marijuana and decreased quantity and numbers of drugs used	Information Dissemination Prevention Education Problem Identification and Referral
INTERVENTION: Life/social skills training				
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved self-concept	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Tremblay et al. (1994)	5–8 years	Selective	Better school adjustment, less fighting and stealing after social skills training for boys identified as disruptive	Information Dissemination Prevention Education Problem Identification and Referral
INTERVENTION: Case management approach, involving in-school intervention programs, technical training, cultural awareness, and therapy				
African American Adolescent Alcohol and Drug Program	12–23 years	Selective	Decreased procriminal values for the treatment group	Prevention Education Alternatives Problem Identification and Referral

Table K continued on the next page

Guide to Science-Based Practices**Individual Domain***Continued from the previous page*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Life skills training/values clarification and antiviolence models				
Early Intervention Program with Delinquent Substance-Using Adolescents	13–19 years	Indicated	Decreased fighting and trouble with the police	Prevention Education Problem Identification and Referral
Positive Action	Grades Pre-K–12	Universal Selective	Reduced violence and truancy	Information Dissemination Prevention Education
INTERVENTION: Home visits				
Houston Parent-Child Development Center	Parents and children 0–3 years	Selective	Reduced aggressive behavior	Prevention Education
Perry Preschool Project	3–5 years	Selective	Reduced truancy, delinquency, and school dropout; improved academic performance	Prevention Education
Yale Child Welfare Project	10 years	Indicated	Reduced antisocial behavior in school at age 10 for boys	Prevention Education Alternatives

Individual Domain

L Skills

Targeted Risk/Protective Factor:

Social competence is associated with decreased likelihood of initiating or continuing use of substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Life skills/social skills training (e.g., classroom training, training outside of school, role-play)				
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Increased Getting Real communication with peers (communication based on ability to say no and feel good about oneself and one's responses to inappropriate ATID-related and other behaviors)	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Family Advocacy Network	13–17 years	Selective	Increased ability to refuse alcohol, tobacco, and marijuana	Information Dissemination Prevention Education
Life Skills Training Program	13–17 years	Universal	Decreased levels of tobacco, alcohol, and marijuana use	Information Dissemination Prevention Education
Peer Assistance and Leadership	12–18 years	Universal Selective	Increased communication, decision-making skills, and ability to refuse to use substances	Information Dissemination Prevention Education Alternatives
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved school attendance	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Project C.A.R.E.	9 years	Selective	Improved skills in goal setting	Prevention Education
Project Toward No Tobacco Use	10–15 years	Universal	Decreased use of tobacco products	Information Dissemination Prevention Education
Residential Student Assistance Program	13–17 years	Indicated	Decreased use of alcohol, tobacco, and marijuana and decreased quantity and numbers of drugs used	Information Dissemination Prevention Education Problem Identification and Referral
School Connectedness and Student Resiliency: Skills for Action	13–18 years	Universal Selective Indicated	Decreased aggression, fewer suspensions, improved academic performance, and prosocial attitudes	Information Dissemination Prevention Education Alternatives Problem Identification and Referral

M Predispositions

Targeted Risk/Protective Factor:

Mental/emotional stress increases risk for initiating or continuing use of substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Therapeutic interventions combined with social skills education and artistic engagement				
Project Self-Discovery	15–18 years	Selective	Improved ability to cope with stress and reduced perceived psychological stress and problems	Prevention Education

Guide to Science-Based Practices

Individual Domain

N Predispositions

Targeted Risk/Protective Factor:

Sense of well-being/self-confidence decreases the likelihood of participating in multiple problem behaviors, including substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Community service				
Across Ages	<13 years	Selective	Increased sense of well-being, increased knowledge of community service, and more positive attitudes toward people and the future	Information Dissemination Prevention Education Alternatives
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved self-concept	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
INTERVENTION: Social group work combined with social skills education and artistic engagement				
Be a Star	5–12 years	Selective	Increased self-efficacy and self-concept	Information Dissemination Prevention Education Alternatives
INTERVENTION: Team-centered, peer-led, interactive curriculum				
ATLAS	13–19 years	Universal	Improved perception of athletic competence	Information Dissemination Prevention Education Alternatives

O Predispositions

Targeted Risk/Protective Factor:

Risk-taking propensity/impulsivity is associated with participating in multiple problem behaviors, including substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Public service announcements (PSAs) warning of dangers of drug use and other risk-taking behavior				
Palmgreen et al. (1995)	Youth, young adults	Universal Selected	Sensation-targeted PSAs reduced participation in high-risk behavior	Information Dissemination
INTERVENTION: Social group work combined with social skills education and artistic engagement				
Be a Star	5–12 years	Selective	Increased self-control	Information Dissemination Prevention Education Alternatives

Family Domain

P Skills

Targeted Risk/Protective Factor:

Consistency of parenting/interaction within family is associated with more positive family dynamics and decreased adult predispositions for stress

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Parent education/parenting skills training				
Adolescent Transitions Program (ATP)	Parents of adolescents (11–17 years)	Universal Selective Indicated	Reduced family conflict, improved school behavior, and reduced tobacco use	Information Dissemination Prevention Education Alternatives Problem Identification and Referral
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Increased use of community services for personal and family problems Increased youth involvement in setting family rules (both ATID rules and non-ATID rules)	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
DARE To Be You	<13 years	Selective	Increased parental self-esteem and appropriate control techniques	Prevention Education
Focus on Families	Parents receiving methadone and their children	Selective	Increased parenting skills; decreased parental drug use	Information Dissemination Prevention Education
Kazdin et al. (1992)	8–11 years	Selective	Reduced parental stress; decreased child dysfunction and aggressive, antisocial, and delinquent behavior; increased prosocial competence	Information Dissemination Prevention Education
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved self-concept	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Project Family	<13 years	Universal	Positive effects on parental standard-setting, monitoring, and discipline and on parent-child affective quality	Information Dissemination Prevention Education
Strengthening Families Program	<13 years	Selective	Increased parental self-efficacy, parental discipline, and monitoring	Information Dissemination Prevention Education Problem Identification and Referral
Strengthening Hawaii Families Program	8–11 years	Universal Selective	Improved effective parenting skills/attitudes and parental well-being	Information Dissemination Prevention Education

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Family Domain

Q Family Bonding/Cohesion

Targeted Risk/Protective Factor:

Positive family dynamics are associated with more positive bonding with family members and gains in social skills

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Parent education/family therapy				
Adolescent Transitions Program	Parents of adolescents (11–17 years)	Universal Selective Indicated	Decreased tobacco use	Information Dissemination Prevention Education Alternatives Problem Identification and Referral
Be a Star	5–12 years	Selective	Increased family bonding	Information Dissemination Prevention Education Alternatives
La Familia Fuerte	6–11 years	Selective	Decreased parental stress	Prevention Education
INTERVENTION: Task-oriented family education sessions combining social skills training to improve family interaction (e.g., communication skills)				
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Increased positive communication with youth	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Families and Schools Together	Preschool through middle school	Selective	Decreased child behavior problems	Information Dissemination Prevention Education Problem Identification and Referral
Family Advocacy Network	13–17 years	Selective	Increased ability to refuse alcohol, tobacco, and marijuana	Information Dissemination Prevention Education
Family Effectiveness Training	<13 years	Selective	Improved school performance and behavioral outcomes	Information Dissemination Prevention Education
Keep a Clear Mind	9–11 years	Universal	Enhanced parent-child communication regarding refusing and avoiding alcohol, tobacco, and drugs	Information Dissemination Prevention Education
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved achievement	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Project STAR	13–17 years	Universal	Decreased use of marijuana, tobacco, and alcohol	Information Dissemination Community-based Processes Environmental Approach
Strengthening Hawaii Families Program	8–11 years	Universal Selective	Improved family cohesion	Information Dissemination Prevention Education

Family Domain

R Family Bonding/Cohesion

Targeted Risk/Protective Factor:

Social bonding is associated with decreased likelihood of participating in multiple problem behaviors, including substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Parent education and classroom management				
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Increased youth bonding with mother and father	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced disciplinary problems	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Seattle Social Development Project	<13 years	Universal	Reduced antisocial behavior, improved academic skills, greater commitment to school, reduced levels of alienation, and better bonding to prosocial persons	Information Dissemination Prevention Education

S Family Domain/Family Climate

Targeted Risk/Protective Factor:

Family conflict/abuse increases the likelihood that children will initiate substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Home visits				
Prenatal/Early Infancy Project	High school-aged mothers and infants	Selective	Decreased child abuse and neglect, reduced prenatal problems, delayed subsequent pregnancies, improved high school graduation rates	Information Dissemination Problem Identification and Referral Community-based Processes
INTERVENTION: Parent education				
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Decreased family pathology	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes

Guide to Science-Based Practices

Family Domain

**T
Family Climate**

Targeted Risk/Protective Factor:

Parents who are active substance abusers or have history of substance abuse increase likelihood that youth will initiate or continue use of substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Individual and parent/child counseling, parent education, play therapy, skill-building for children				
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Decreased inappropriate parents' situational use of alcohol, tobacco, and drugs; increased alcohol and drug knowledge and beliefs (by parents)	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced substance use	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Strengthening Families Program	<13 years	Selective	Improved behavioral outcomes among children of recovering substance abusers, decreased tobacco and alcohol use, decreased family conflict, and increased family communication	Information Dissemination Prevention Education Problem Identification and Referral

Peer Domain

U Bonding With Antisocial Peers

Targeted Risk/Protective Factor:

Inappropriate sexual activity is associated with multiple problem behaviors, including substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Classroom and peer support groups reinforcing unsupportive attitudes toward sexual permissiveness				
SMART Leaders	13–17 years	Selective	Increased knowledge about sex and less permissive views of early sexual activity	Information Dissemination Prevention Education

V Bonding With Antisocial Peers

Targeted Risk/Protective Factor:

Reinforcement of negative norms and expectations about substance use within peer group increases risk that youth will initiate or continue use of substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Guided peer reinforcement of pro-abstinence norms among children with recurrent conduct problems, combined with drug education and peer resistance skill-building				
Peer Support Retreats	<13 years	Selective	Increased knowledge about sex and less permissive views of early sexual activity	Information Dissemination Prevention Education
INTERVENTION: Peer resistance education				
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Increased Getting Real communication with peers (communication based on ability to say no and feel good about oneself and one's responses to inappropriate ATID-related and other behaviors)	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Peer Assistance and Leadership	12–18 years	Universal Selective	Increased ability to resist peer pressure and lower involvement with peers who use harmful substances	Prevention Education Alternatives
INTERVENTION: Task-oriented family education sessions combining social skills training to improve family interaction (e.g., communication skills)				
Keep a Clear Mind	9–11 years	Universal	Decreased perception of peer alcohol, tobacco, and marijuana use	Information Dissemination Prevention Education

Table W continued on the next page

Guide to Science-Based Practices**Peer Domain***Continued from the previous page*

W
Peer Domain/Bonding With Antisocial Peers

Targeted Risk/Protective Factor:*Ties to deviant peers/gang involvement is associated with multiple problem behaviors, including substance use*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Parent education and classroom management				
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced violence and truancy	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Seattle Social Development Project	<13 years	Universal	Reduced delinquency with weaker effects on drug use	Information Dissemination Prevention Education
INTERVENTION: Involving youth in alternative/recreational activities				
Be a Star	5–12 years	Selective	Increased prosocial behavior	Information Dissemination Prevention Education Alternatives
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved self-concept	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
INTERVENTION: Peer resistance education				
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved self-concept	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Southwest Texas State University's Program	<13 years	Selective	Increased ability to resist peer pressure and lower involvement with peers who use substances	Alternatives

School Domain**X
Performance****Targeted Risk/Protective Factor:**

*Academic failure/dropping out of school vs. academic achievement
is associated with multiple problem behaviors, including substance use*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: School-based support group and skills development class				
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved achievement	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Reconnecting Youth Program	13–17 years	Indicated	Improved school performance, increased school bonding and social support, and reduced severity of drug problems	Prevention Education Problem Identification and Referral
INTERVENTION: Peer tutoring, along with school-based skills development and substance abuse education				
Project SUCCESS	Grades 7–8	Universal	Decreased number of D and F grades received by youth while in the project; the longer in the program, the smaller the increase in use of alcohol, marijuana, inhalants, and polydrugs	Prevention Education Problem Identification and Referral
INTERVENTION: Tutoring, peer tutoring, homework assistance				
ADEPT Drug and Alcohol Community Prevention Project	K–6th grade	Universal	Improved reading and math test scores	Prevention Education Alternatives
Helping Children and Their Families Face Drug Abuse	7–11 years	Selective	Improved Spanish, social studies, science, and overall grade point average	Prevention Education
La Familia Fuerte	6–11 years	Selective	Higher scores on standardized achievement tests	Prevention Education
Sunshine Project	Elementary and middle schools	Selective	Improved mathematics and reading, greater gains for those in the program for a longer time	Prevention Education

Guide to Science-Based Practices

School Domain

Y Bonding

Targeted Risk/Protective Factor:

School bonding is associated with positive attitudes toward school and improved school achievement

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Creating supportive school communities				
Child Development Project	<13 years	Universal	Increased liking of school and learning motivation	Information Dissemination Prevention Education Community-based Processes Environmental Approach
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Increased school bonding (see conceptual model in Strader, Collins & Noe, 2000)	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Multi-Model School-Based Prevention Demonstration	Middle school	Universal	Improved grade point averages	Prevention Education Problem Identification and Referral
NTU Project	<13 years	Selective	Increased school interest and demonstrated reduced school anxiety	Information Dissemination Prevention Education
Peer Assistance and Leadership	12–18 years	Universal Selective	Increased academic performance Reduced discipline referrals Reduced failure rates	Prevention Education Alternatives
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved school attendance	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
INTERVENTION: Cooperative learning intervention				
Positive Action	Grades Pre-K–12 Indicated	Universal Selective	Improved achievement	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
INTERVENTION: Instructor-facilitated, sport team-centered peer-led interactive curriculum				
ATLAS	13–19 years	Universal	Improved perception of the school team as an information source	Information Dissemination Prevention Education Alternatives
INTERVENTION: Life and social skills training				
School Connectedness and Student Resiliency; Skills for Action	13–18 years	Universal Selective Indicated	Improved academic performance, decreased aggression, fewer suspensions	Information Dissemination Prevention Education Alternatives Problem Identification and Referral

School Domain**Z
Bonding****Targeted Risk/Protective Factor:***Regular school attendance is associated with positive attitudes toward school*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Mentoring				
Across Ages	<13 years	Selective	Fewer days absent and improved attitudes toward school	Information Dissemination Prevention Education Alternatives
Peer Assistance and Leadership	12–18 years	Universal Selective	Reduced academic failure	Prevention Education Alternatives
INTERVENTION: Individual and group counseling based on drug education, self-esteem, stress reduction, family/peer relations, decisionmaking skills, and school attitude				
Strategies with Technology and Affective and Remedial Support	Grades 9–12	Selective	Decreased truancy	Information Dissemination Prevention Education

**AA
Climate (Level of Use/Discipline/Curricula)****Targeted Risk/Protective Factor:***Positive instructional climate (responsiveness to student needs, classroom management patterns, parent involvement, etc.) is related to improved teacher practices and increases in student-school bonding and student achievement*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Comprehensive school change programs, including components to improve parent involvement, change classroom management and/or instructional style, and improve student participation and school bonding				
Child Development Project	<13 years	Universal	Improved teacher practices led to positive changes in classroom behaviors, which, in turn, were related to students' sense of communityPositive Action	Information Dissemination Prevention Education Community-based Processes Environmental Approach Grades Universal
Improved achievement	Information Dissemination Pre-K–12	Selective Indicated		Prevention Education Community-based Processes Environmental Approaches
Seattle Social Development Project	<13 years	Universal	Improved academic skills, greater commitment to school, reduced misbehavior in school, better prosocial bonding, and fewer incidents of drug use in school	Information Dissemination Prevention Education

Guide to Science-Based Practices**School Domain****BB
Climate****Targeted Risk/Protective Factor:***School responsiveness to student needs is associated with reductions in substance use*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Peer tutors and use of school for after-hours enrichment and parent education				
Project HIPATHE	13–17 years	Universal Selective	Decreased substance abuse and delinquency and improved grades. Improved school climate and policies through school-community partnership approach	Prevention Education Environmental Approaches
INTERVENTION: Peer tutoring, along with school-based skills development and substance abuse education				
Peer Assistance and Leadership	12–18 years	Universal Selective	Increased academic performance. Increased attendance, reduced discipline referrals	Prevention Education Alternatives

**CC
School Policy****Targeted Risk/Protective Factor:***School norms/policies discouraging substance use and related behaviors are associated with improved teacher practices and positive student outcomes*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Creation and enforcement of clear drug policies, often accompanied by change in disciplinary codes and installation of security devices				
CASPAR Intervention Project	13–17 years	Selective	Increased use of treatment facilities by students; staff who participated in the workshops more likely to talk to students regarding alcohol, tobacco, and drug issues and refer students for help	Information Dissemination Prevention Education Problem Identification and Referral
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved school attendance	Information Dissemination Prevention Education Community-based Processes Environmental Approaches
Tri-County Substance Abuse Prevention Alliance	Lifespan; for this component 5–19 years	Universal	Immediate school expulsion policy implemented for possession of substances	Information Dissemination Prevention Education Community-based Processes Environmental Approach
INTERVENTION: Changes in teaching approaches and parent involvement, with classroom drug education				
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Reduced substance use	Information Dissemination Prevention Education Community-based Processes Environmental Approaches

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School Domain*continued from previous page*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
Child Development Project	<13 years	Universal	Improved teacher practices led to positive changes in classroom behaviors, which, in turn, were related to students' sense of community	Information Dissemination Prevention Education Community-based Processes Environmental Approach
INTERVENTION: Student Assistance Program, including teacher training, student programming, and school policy change				
Perth Amboy Community Partnership for Youth	School-aged youth	Universal	School board adoption of school substance abuse policy; purchase of tobacco products by minors declined	Prevention Education Problem Identification and Referral Community-based Processes Environmental Approach
INTERVENTION: Comprehensive health curriculum, combined with Student Assistance Program model				
Growing Up Well	6–11 years	Universal Selective	Less-than-optimal implementation of curricula and failure to adopt Student Assistance Program model resulted in program failure	Information Dissemination Prevention Education Community-based Processes

**DD
Skills****Targeted Risk/Protective Factor:***Social competence is associated with decreased likelihood of initiating use of substances*

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Life skills training with role play				
ATLAS	13–19 years	Universal	Increased refusal skills	Information Dissemination Prevention Education Alternatives

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Community Domain

EE Norms

Targeted Risk/Protective Factor:

Community and societal norms that appear to condone substance abuse increase likelihood youth will initiate or continue to use substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Education to alter perceptions of societal norms and expectations				
Adolescent Alcohol Prevention Trial	<13 years	Universal	Prevented drug use	Information Dissemination Prevention Education
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Increase family members' use of community services for personal and/or family problems	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Positive Action	Grades Pre-K–12	Universal Selective Indicated	Improved self-concept	Information Dissemination Prevention Education Community-based Processes Environmental Approaches

FF Access

Targeted Risk/Protective Factor:

Convenient access to alcohol, drugs, and/or tobacco increases likelihood youth will initiate use of substances or continue to use substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Establishing drug-free sites within communities				
Project STAR	11–17 years	Universal	Reduced initiation of marijuana, tobacco, and alcohol in youth who never used, and increased perceptions of friends' intolerance of drug use	Information Dissemination Prevention Education Community-based Processes Environmental Approach
INTERVENTION: Enforcement of tobacco sales laws				
Stop Teenage Addiction to Tobacco	<21 years	Universal	Reduced use of tobacco	Information Dissemination Environmental Approaches

Community Domain

GG Resources

Targeted Risk/Protective Factor:

Availability of constructive recreation decreases likelihood youth will participate in multiple problem behaviors, including substance use

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Establishment of supervised youth recreational and cultural programs				
Greater Alliance of Prevention Systems	13–17 years	Selective	Decreased levels of substance use; increased assertiveness and cultural pride	Information Dissemination Alternatives Community-based Processes Environmental Approach
Project Self-Discovery	15–18 years	Selective	Increased ability to cope with stress	Alternatives
Reaching High-Risk Youth in Public Housing	All ages	Selective	Decreased presence of crack cocaine and community drug-dealing activity in public housing with new Boys and Girls Clubs; decreased vandalized housing; and reduced drug use	Prevention Education Alternatives Community-based Processes
SMART Leaders	13–17 years	Selective	Decreased vandalized housing and reduced drug use	Information Dissemination Prevention Education Alternatives
SMART Moves (in Boys and Girls Clubs)	11–17 years	Selective	Reduced delinquency incidents	Information Dissemination Prevention Education Alternatives
Southwest Texas State University's Program	<13 years	Selective	Increased ability to resist peer pressure and reduced involvement with peers who use substances	Information Dissemination Prevention Education Alternatives

HH Resources

Targeted Risk/Protective Factor:

Latchkey status/lack of monitoring youths' activities increases risk for initiating or continuing use of substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Mentoring combined with community service and drug education				
Across Ages	<13 years	Selective	Increased sense of well-being and knowledge of community service; more positive attitudes toward people and the future	Information Dissemination Prevention Education Alternatives

Guide to Science-Based Practices

Community Domain

II Mobilization

Targeted Risk/Protective Factor:

Existence of widely supported community prevention efforts reinforce positive messages sent by individual prevention programs to decrease likelihood that youth will initiate or continue to use substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Establishment and funding of prevention infrastructure with opportunities for community “ownership”				
Communities Mobilizing for Change on Alcohol	15–20 years	Universal	Reduced likelihood of 18–20-year-olds to provide alcohol to other teens, try to buy alcohol, drink in a bar, and consume alcohol	Community-based Processes Environmental Approaches
Creating Lasting Connections	9–17 years	Universal Selective Indicated	Enhance community capacity (including infrastructure and resource development)	Information Dissemination Prevention Education Problem Identification and Referral Community-based Processes
Lakeland County Fighting Back Project	Lifespan	Universal	Statistically significant reductions in underage alcohol use; reductions in substance abuse	Prevention Education Alternatives Community-based Processes Environmental Approach
Ozarks Fighting Back	Lifespan	Universal	Reduced use of illicit drugs and underage alcohol use	Prevention Education Alternatives Community-based Processes Environmental Approach
Project Northland	11–14 years	Universal	Reduced use of alcohol and tobacco; reduced tobacco and marijuana use; changed understanding about how many youth drink	Prevention Education Community-based Processes Environmental Approach
Project STAR	11–17 years	Universal	Reduced initiation of marijuana, tobacco, and alcohol in youth who never used, and increased perceptions of friends' intolerance of drug use	Information Dissemination Prevention Education Community-based Processes Environmental Approach
Safe 2000 Community Partnership	Lifespan	Universal	Statistically significant reductions in underage alcohol use; reductions in substance abuse	Prevention Education Alternatives Community-based Processes Environmental Approach
PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
Tri-County Substance Abuse Prevention Alliance	Lifespan	Universal Selective	Statistically significant reductions in substance abuse	Prevention Education Alternatives Community-based Processes Environmental Approach Problem Identification and Referral

Table II continued on the next page

Community Domain

Continued from the previous page

INTERVENTION: Multiagency activities and collaboration				
Ozarks Fighting Back	Lifespan	Universal	Established a coalition of 108 members representing almost all key components of the community; established a Prevention Development Fund Program to support services to youth; increased coordination between public and private agencies	Prevention Education Alternatives Community-based Processes Environmental Approach
Project Involvement	8–17 years	Universal	Benefited from being part of the consortium by forming new linkages; consortia goals and objectives were achieved	Prevention Education Problem Identification and Referral Community-based Processes
Safe 2000 Community Partnership	Lifespan	Universal	Developed four community action teams that developed prevention capacities within 50 communities	Information Dissemination Prevention Education Community-based Processes Environmental Approach
Substance Abuse Resources and Disability Issues	Disabled youth generally	Selective	Improved awareness and knowledge of substance use/abuse issues for disabled youth	Information Dissemination Prevention Education Community-based Processes
Tri-County Substance Abuse Prevention Alliance	Lifespan	Universal	Strengthened relationships among police, schools, and substance abuse organizations; promoted coordination of services for minority populations	Information Dissemination Prevention Education Community-based Processes Environmental Approach

Guide to Science-Based Practices**Society Domain****JJ****Access****Targeted Risk/Protective Factor:**

Convenient access to alcohol, drugs, and tobacco increases likelihood youth will initiate use of substances or continue to use substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Enforcement of tobacco sales laws				
Stop Teenage Addiction to Tobacco	<21 years	Universal	Reduced use of tobacco	Information Dissemination Environmental Approach

KK**Access****Targeted Risk/Protective Factor:**

Low retail prices of alcohol, drugs, and/or tobacco increase likelihood that youth will initiate use of substances or continue to use substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: Increased taxes on alcohol and tobacco				
Coate & Grossman (1988)	12–20 years	Universal	Increased beer prices reduced frequent youth drinking	Environmental Approach

LL**Norms****Targeted Risk/Protective Factor:**

Exposure to mass media messages that appear to support substance abuse increases likelihood that youth will initiate use of substances or continue to use substances

PROGRAMS OR RESEARCH SUPPORTING INTERVENTION	TARGET AGE	IOM CATEGORY	PROGRAM OUTCOME	STRATEGIES UTILIZED BY OVERALL PROGRAM
INTERVENTION: PSAs warning of dangers of drug use and other risk-taking behaviors				
Palmgreen et al. (1995)	Youth, young adults	Universal Selective	Sensation-targeted PSAs reduced participation in high-risk behaviors	Information Dissemination
INTERVENTION: Classroom-based media education to counter alcohol and tobacco advertising				
Project STAR	11–17 years	Universal	Reduced use of marijuana, tobacco, and alcohol	Information Dissemination Prevention Education Community-based Processes Environmental Approach
Project Towards No Tobacco Use	10–15 years	Universal	Decreased use of tobacco products	Information Dissemination Prevention Education

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